

# FEE TRANSMITTAL for FY 2007

Complete if Known

Application Number 10/073463  
Filing Date 02/11/2002  
First Named Inventor Rzhetsky et al.  
Examiner Name DeJong  
Art Unit 1631  
Attorney Docket No. 070050.1942

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 1,295

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number  
Deposit Account Name

02-4377

Baker Botts L.L.P.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### Extra Claim Fees

Extra Claims Fee Fee Paid  
Total Claims  x 25 = \$0

Independent Claims  x 105 = \$0

Multiple Dependent  = \$0

SUBTOTAL \$0

Fee Description	Large Entity	Small Entity
Claims in excess of 20	50	25
Independent claims in excess of 3	210	105
Multiple dependent claim, if not paid	370	185

## FEE CALCULATION (continued)

### ADDITIONAL FEES

☐ Surcharge - late oath or filing fee  
☐ Non-English Specification  
☐ Extension for reply within first month  
☐ Extension for reply within second month  
☒ Extension for reply within third month \$525  
☐ Extension for reply within fourth month  
☐ Extension for reply within fifth month  
☐ Notice of Appeal  
☐ Filing a brief in support of an appeal  
☐ Petition to revive - unavoidable  
☒ Petition to revive - unintentional \$770  
☐ Utility Issue Fee  
☐ Design Issue Fee  
☐ Publication Fee  
☐ Petitions to the Commissioner  
☐ Request for Continued Examination (RCE)  
☐ Information Disclosure Statement (IDS)

Other fee -

SUBTOTAL (\$ ) 1,295

## SUBMITTED BY

Name (Print/Type) Kimberley A. Gavin

Registration No. (Attorney/Agent)

51,723

(Complete if applicable)

Telephone 212-408-2500

Signature

Date

06/13/2008

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

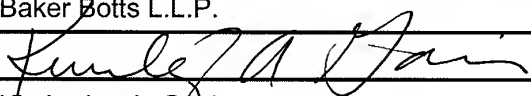
Total Number of Pages in This Submission

Application Number	10/073463
Filing Date	02/11/2002
First Named Inventor	Rzhetsky et al.
Art Unit	1631
Examiner Name	DeJong
Attorney Docket Number	070050.1942

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Baker Botts L.L.P.		
Signature			
Printed name	Kimberley A. Gavin		
Date	06/13/2008	Reg. No.	51,723

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature			
Typed or printed name		Date	

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